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Pre-Approved Employee Reimbursements (ERs):

WSP Program Coordinators (PCs) will provide pre-approved reimbursement details before all WSP sponsored events.

- Corpsmembers (CM) will be eligible for travel reimbursement for the following events as long as they can provide original receipts that include all required components.
    - o Live Scan – Criminal History Check(s)
    - o Pre-Employment Physical
    - o Pre-Employment Drug Test
    - o First Aid/CPR Certification
    - o Mileage **from** Orientation *or* Behind-the-Wheel Driving Test
    - o Travel to/from Regional Training
    - o Travel to/from District Required Outreach Events (ROEs)
    - o Travel **to** WSP's Retreat/Recognition Ceremony
    - o Road Tolls and Parking associated with the above events
    - o Water Board Corpsmembers – need to get pre-approval from PC for site related travel

CalATERs Basics:

- If you already have a CalATERs account with another organization, you will need to cancel that account in order to create one with WSP.
- All ERs are assigned a Transmittal Number (TEA#########), keep this number for your records. It will be listed on the Transmittal Page that you print and submit to WSP via USPS mail.
- The total sum of one ER claim must be *over* $10.00, as WSP pays a $4 processing fee for each ER.

- You can check the status of your claim on the CalATERs Global website after submission by right clicking on the expense.
- If the expense disappears from CalATERs, that usually means it has been paid out and you should receive your check soon. Contact your PC if it takes more than one month to receive reimbursement.
- Military time is required when reporting time of day for all expenses.
- The "First Date of Trip" and "Last Date of Trip" need to match your receipts and/or specifics dates given to you directly from your PC.

Original Itemized Receipt Requirements

- **Original receipts must be legible and scan able, do not crumple, use highlighters, staple or tape over any print!**
- Small receipts must be taped to a 8 ½" x 11" piece of paper **and** the paper needs to include your full name, dates of travel/expense, and reason for expense.
    - o Please carefully tape around the full circumference of the receipts, WSP staff need to run these through the scanner, so be careful not to create a potential paper jam!
- More than one *meal* receipt can be taped to a single paper but must be separate from other *types* of receipts such as parking or toll receipts.
- Scratch paper is okay, but only tape receipts to one side of the paper.

Food Receipt Requirements:

- Food item listed (not "misc.")
- Amount (exclude tip, alcohol, and tax on alcohol in claim)
- Date of Purchase
- Vendor Name

Lodging Receipt Requirements: *It is very rare for CMs to need to pay for lodging.*

- Description (not "misc." or other)
- Date of Purchase
- Amount per night
- Taxes listed separately
- Location
- Vendor

Pre-Enrollment Expense Receipt Requirements:

- Item Description (not "misc." or other)
- Date of Purchase
- Amount
- Vendor
- Location (it must be in California)
- WSP Corpsmember's Name
- If the receipt lacks any of these details, a copy of your bank statement can be included (blackout your bank account number before submission)

Toll & Parking Receipt Requirements:

- Item Description (not "misc." or other)
- Date of Purchase
- Amount

TEA00223344

Trudy Trout
October 2020
WSP Regional Training
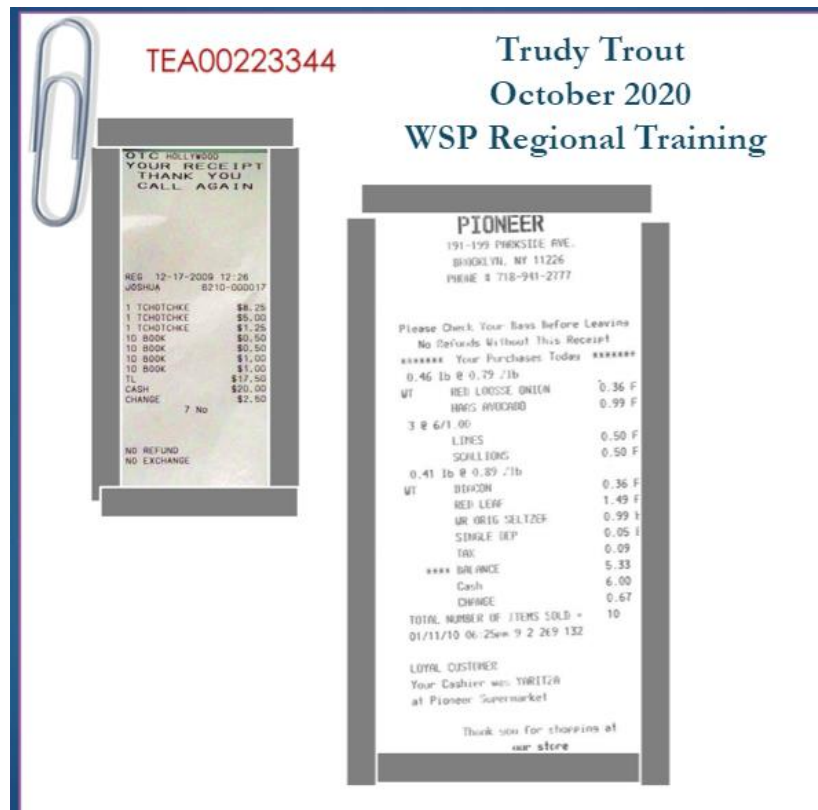
Pre-enrollment Verification Expenses

Live Scans, Pre-Enrollment Physicals, First Aid/CPR and Drug Tests: Fees associated with these requirements are "Non-Travel Expenses" and must be listed as "Business Expense - Other" (NOT Legal Expenditure). **You can request reimbursement for all Pre-Enrollment Verifications on one ER request**, simply add the date of your first verification as the "Start Date" and the date of the last verification to the "End Date" in CalATERs.

Meal Reimbursement

- Meals must be listed as" Breakfast," "Lunch," or "Dinner" **NOT**" Business Breakfast," "Business Lunch," or "Business Dinner."
- Ensure your first screen looks like this: (do not choose any other options)

Please make your selections below in order to create a new form

Form Type: Expense Reimbursement Form
Claim Type: In State Travel
Trip Type: Regular Travel

Ok   Cancel

Travel Status Timeframes - times/dates must align with appropriate meal allowances:

Meal Allowances		
ITEM	**MAX. AMOUNT**	**DETAILS**
Breakfast	$7	If trip BEGINS <u>by 0600</u> or ENDS <u>after 0800</u> AND every day in between
Lunch	$11	If trip BEGINS <u>by 1100</u> or ENDS <u>after 1400</u> AND every day in between
Dinner	$23	If trip BEGINS <u>by 1700</u> or ENDS <u>after 1900</u> AND every day in between

- If the amount on the receipt exceeds the maximum reimbursement meal allowance, CMs only claim the maximum amount allotted - NOT the true cost of the meal.
- CMs cannot seek reimbursement for tips or incidentals.
- If any non-reimbursable items such as alcohol, tobacco, or toiletries (and associated taxes) were purchased with qualifying foods times, those costs must be crossed off the receipt with ONE SINGLE ~~STRIKETHROUGH~~ LINE.
    - If possible, purchase these items separately.
    - Alcohol should never be transported in a state vehicle!

Note: For travel across two fiscal years: *(if a trip covers time that includes June 30 and July 1)*

If your ER begins in June and ends in July, you must submit two separate ER's. (One claim for each Fiscal Year).

- The June claim will end at 24:00 hours on June 30. Note in the remarks section of the TEC or ER notes, the claim is "continued in July."
- The July claim begins at 0001 hours on July 1 and should include in the ER notes "continued from June."

Lodging

On rare occasions, some CMs may be eligible for lodging. If staying in a chain hotel you will choose "Lodging" and if staying at an AirBnB choose "Lodging Short term Rental" If you cannot type or select the county of your lodging just click "none of the above".

You will receive a warning in CalATERs when your room rate is higher than $90.00 per night. If you are staying in a city/county with state rate allowed more than $90.00, just click yes and you will be fine.

County	Max Amount
All Counties in CA not listed below	$90
Napa, Riverside and Sacramento	$95
Marin County	$110
Los Angeles, Orange, Ventura & Edwards AFB, excluding City of Santa Monica	$120
Monterey, San Diego	$125
Alameda, San Mateo, Santa Clara	$140
City of Santa Monica	$150
San Francisco	$250

Personal Vehicle Mileage Requirements

- All CMs must seek pre-approval from their PC to seek reimbursement for personal mileage BEFORE the trip.
- CMs may only seek reimbursement if traveling **over 50 miles** (one-way) from their home address.
- WSP CMs must carpool with another WSP CM, unless they are placed at a single CM placement or COVID safety protocol does not allow for carpooling.
- Personal mileage will only be approved if a Placement Site vehicle is not available *and* neighboring CMs cannot fit another person in their carpool.
- WSP must have proof of current car insurance and drivers' license before they can approve these requests.
- CMs must type in the **full address** in the "To" and "From" fields under "Location", not just the city.
- Mileage reimbursements are calculated by the number of miles **from** the address indicated in your profile **to** your destination address. Mileage will be verified using Google Maps and will only be approved if the shortest route is chosen.
- Gas receipts are NOT required when claiming personal mileage, unless using a WSP Voyager Credit Card (*CCC and CDFW sites only*).
- When creating your ER, you will also need to add the **license plate number of the vehicle** you used.

Step-by-Step Submission

1. Navigate to CalATERs Global and sign-in using your User ID and updated password.
2. Create New ER: Click the "New" button to create an ER.
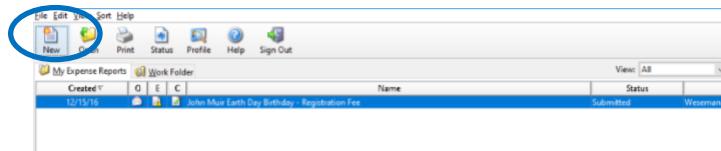
3. **Select Form Type, Claim Type, and Trip Type:**
   - **Form Type:** Choose "Expense Reimbursement Form"
   - **Claim Type:** Choose "In State Travel" for all ERs with only one exception.
     > **Exception:** If seeking reimbursement for a Live Scan, Pre-Enrollment Physical, First Aid/CPR or Drug Test fee choose "Non-Travel Expenses"
   - **Trip Type:** Choose "Regular Travel" or "Non-Travel Expenses"
     i. **DO NOT use** "State-Sponsored Conference" under any circumstances!

4. **Name your ER:** Enter a unique name for each event into the "Report Name" tab
   - **Examples:** WSP Required Training, Pre-Enrollment Expenses, WSP Required Outreach Event
5. **Verify**:
   - Default Approver: Your Region's Program Coordinator (Greg Poulton or Jody Weseman)

- Mailing Address: This is where your reimbursement checks will be mailed to.
- If needed, update your approver and mailing address by going to the "Profile" tab at the top of the page.

6. **Enter**:
   - Trip Information: Add Travel Timeline, WSP will identify these specific dates for each WSP event.
     i. If the ER is for a Live Scan, Pre-enrollment Physical, First Aid/CPR or Drug Test use the date(s) provided on the receipt.
   - Times: Use military time.
   - Location: Always provide full address of where you traveled from and to, not simply the city.
   - Purpose: WSP Required Event or WSP Required Test

This is the timeframe that you are on "travel status"

Use Military Time

Use Complete Address

Dialog box: Jody A Weseman [Expense Report Information]

Specify a report name that follows your department policy or department naming convention.
Report Name: _____

The Profile must be accurate before continuing with this form. Current Profile information for key fields is displayed below. Additional Profile fields, such as name, email, and LTA addresses may need to be updated.

If Profile changes are needed, click Cancel to exit this form and return to the work queue to update the Profile.

CB Identifier: Non-State Employee
Default Approver: S_____

Mailing Address:
Street: 534 Kings Ave   City: Morro Bay
State: CA   Zip Code: 93442-

Trip Information
Please enter the requested information.

Was Trip > or = 50 miles from Home/Headquarters? ____

First Date of Trip: / /   Start time: ____
Last Date of Trip: / /   End time: ____
Trip Location: _____
Trip Purpose: _____

Ok   Cancel

7. **General Tab:**
   - Make sure the first option "Charge to Account Coding Indicated in my Employee Profile" is selected. Then click on the second tab "Expenses".

8. **Expense Tab:** Use the drop-down arrow to reveal a list of the possible expenses:
   - Scroll down and select the appropriate Expense item (e.g. mileage, meals, business expense other, etc.) under the appropriate day/date of travel.
   - Enter amount of each expense using the "Amount" section at the bottom of the screen.
   - Payment Type is always "cash"
   - Press "Enter" to add each expense.
   - If claiming "Personal Auto Mileage" or "Toll" you will also need to add the **license plate number of the vehicle** you used.

9. **Once the Expenses tab is complete, verify everything on the Summary tab**

10. **Submission Tab:** Approvers can be changed or added on this page
    - Verify your PC is the primary approver.

11. **Submit**
    - Enter your password and submit the claim.

12. **Print all three Transmittal Pages** with Summary & Details, attach **all original itemized receipts**
    DO NOT STAPLE and **mail** hardcopies to your Program Coordinator:
    - **Fortuna:** Attn: Greg Poulton, 1455 Sandy Prairie Court. Suite C, Fortuna, Ca 95540
    - **SLO:** Attn: Jody Weseman, PO Box 1380, San Luis Obispo, Ca 93406

CalATERS-Global
Transmittal Page

TEA001771045

SUBMIT RECEIPTS TO	SUMMARY INFORMATION	
	Name	Blair W Libby
	Expense Dates	08/16/17-08/16/17
CA CONSERVATION CORPS (ACCTG)	Total Expense	44.41 USD
	Advance Schedule Amount	0.00 USD
1719 24TH ST.	Amount Due Employee	44.41 USD
SACRAMENTO CA 95816	Form ID	TEA001771045
	Report Name	Member Edits in Sausalito, CA
	Approver	Jody A Wiseman

DIRECTIONS FOR SUBMISSION

Mail the original receipts, and other appropriate documentation with this page.

Unless your manager has directed otherwise, place this transmittal and receipts into an envelope and address exactly as shown above.

SIGNATURE

I have reviewed these documents.

_____

Jody A Wiseman

Do NOT sign

Editing an ER Once Submitted:

- If you need to edit an already submitted ER use the "Edit" button and "Recall" the submitted ER, make your changes, and resubmit the electronic ER.
- Your Approver (PC) may also reject your submissions and provide notes for correction. Follow the directions and resubmit or call for help.
- If you are **re**submitting a claim, you DO NOT need to mail your edited Transmittal Page, your PC will print.